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### FEC FORM 2

### STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	DAVIDSON, WARREN, , ,  (b) Address (number and street)		neck if addre	ee chanaad		2. Candidate's FEC Idea	ntification Number				
	1790 GREENBRIAR DRIVE		ieck ii addre	ss changed		H6OH08315	nuncation Number				
	(c) City, State, and ZIP Code						ew Amended				
	TROY		OH	H 4537	3-9524	Statement (N	I) OR (A)				
4.	Party Affiliation	5. Office Sough	nt		1	rict of Candidate					
	REPUBLICAN PARTY	House			ОН	08					
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)										
	NOTE: This designation should be f	iled with the app	oropriate offi	ce listed in tl	ne instructions.						
	(a) Name of Committee (in full) DAVIDSON FOR CONGRESS										
	(b) Address (number and street) PO Box 518										
	(c) City, State, and ZIP Code										
	Troy				ОН	45373-0518					
DESIGNATION OF OTHER AUTHORIZED COMMITTEES  (Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.											
NOTE: This designation should be filed with the principal campaign committee.											
	(a) Name of Committee (in full)  Davidson Victory Fu	ınd									
	(b) Address (number and street) 499 S Capitol St SW										
	407										
	(c) City, State, and ZIP Code										
	Washington				DC	20003-4013					
	I certify that I have exa	mined this State	ement and to	the best of	my knowledge a	and belief it is true, correct	and complete.				
Si	gnature of Candidate					Date					
D.	AVIDSON, WARREN, , ,			[Elect	tronically Filed]	03/25/2019					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											
l						1					

FEC FORM 2 (REV. 02/2009)

#### : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F2A Transaction ID :

Form/Schedule: Transaction ID:

FEC Form 2S (Revised 02/2017)

# Optional Supplemental Page for Designation of Additional Authorized Committees

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## **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.								
	(a) Name of Committee (in full) FREEDOMWORKS PAC 2019								
	(b) Address (number and street) PO BOX 75760								
	(c) City, State, and ZIP Code	_							
	WASHINGTON DC 20013								
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.								
	(a) Name of Committee (in full)								
	(b) Address (number and street)								
	(c) City, State, and ZIP Code								
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.  (a) Name of Committee (in full)								
	(a) Name of Committee (in fail)								
	(b) Address (number and street)								
	(c) City, State, and ZIP Code								
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.								
	(a) Name of Committee (in full)								
	(b) Address (number and street)								
	(c) City, State, and ZIP Code								